

RECEIPT DATE: 12/14/12

P 544439 - A

INSTALLATION APPROVAL DATE: _____

PERMIT

A _____

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

PROPERTY OWNER: Cumberland Development

OWNER'S ADDRESS: 16391 A.E. Mullinix Road, Woodbine, MD 21797 PHONE: 301-252-1122

ADDRESS: 17267 Hardy Road TAX ACC'T #: 04-363035

SUBDIVISION: Spring Hollow LOT: 29

SEPTIC TANK CAPACITY (GALLONS): TBD

PUMP CHAMBER CAPACITY (GALLONS): TBD

NUMBER OF BEDROOMS: TBD APPLICATION RATE: TBD

SQUARE FOOTAGE OF HOUSE: TBD

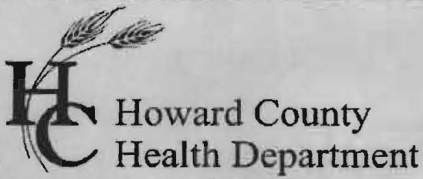
LINEAR FEET OF TRENCH REQUIRED: TBD

| | |
|-----------|---|
| TRENCHES: | TO BE DETERMINED ON APPROVED SUPPLEMENTAL PLAN |
| LOCATION: | TO BE DETERMINED ON APPROVED SUPPLEMENTAL PLAN |
| NOTES: | A SUPPLEMENTAL PLAN PROVIDING SYSTEM DETAILS IS REQUIRED PRIOR TO HEALTH APPROVAL OF BUILDING PERMIT, PLOT PLAN, AND WALL CHECK. AN APPROVED WALL CHECK IS REQUIRED PRIOR TO PRE-CONSTRUCTION INSPECTION. THE OSDS PERMITTED HEREIN IS NOT SUBJECT TO REVISIONS TO COMAR 26.04.02 EFFECTIVE 1/1/2013 ON THE CONDITION THAT FINAL HEALTH APPROVAL OF THE INSTALLATION IS GRANTED PRIOR TO PERMIT EXPIRATION. |

ISSUED BY: JEFF WILLIAMS ISSUE DATE: 12/14/12 EXPIRATION DATE: 12/14/13

- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT. CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM.



Bureau of Environmental Health
 7178 Gateway Drive Columbia, MD 21046
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 12/14/12 **ONSITE SEWAGE DISPOSAL SYSTEM** P 544439-A

INSTALLATION APPROVAL DATE: 12/2/13 **PERMIT** A _____
CONSTRUCTION

PROPERTY ADDRESS: 17267 Hardy Road

SUBDIVISION: Spring Hollow LOT: 29 TAX ID: 04-363035

CONTRACTOR: _____ EMAIL: _____

CONTRACTOR ADDRESS: _____ PHONE: _____

PROPERTY OWNER: Cumberland Development EMAIL: _____

OWNER ADDRESS: 16391 A.E. Mullinix Road, Woodbine, MD 21797 PHONE: 301-252-1122

SEPTIC TANK SIZE (GALLONS): 2000

PUMP CHAMBER CAPACITY (GALLONS): _____ PUMP SIZE: _____

NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. +4,383 APPLICATION RATE: 1.2

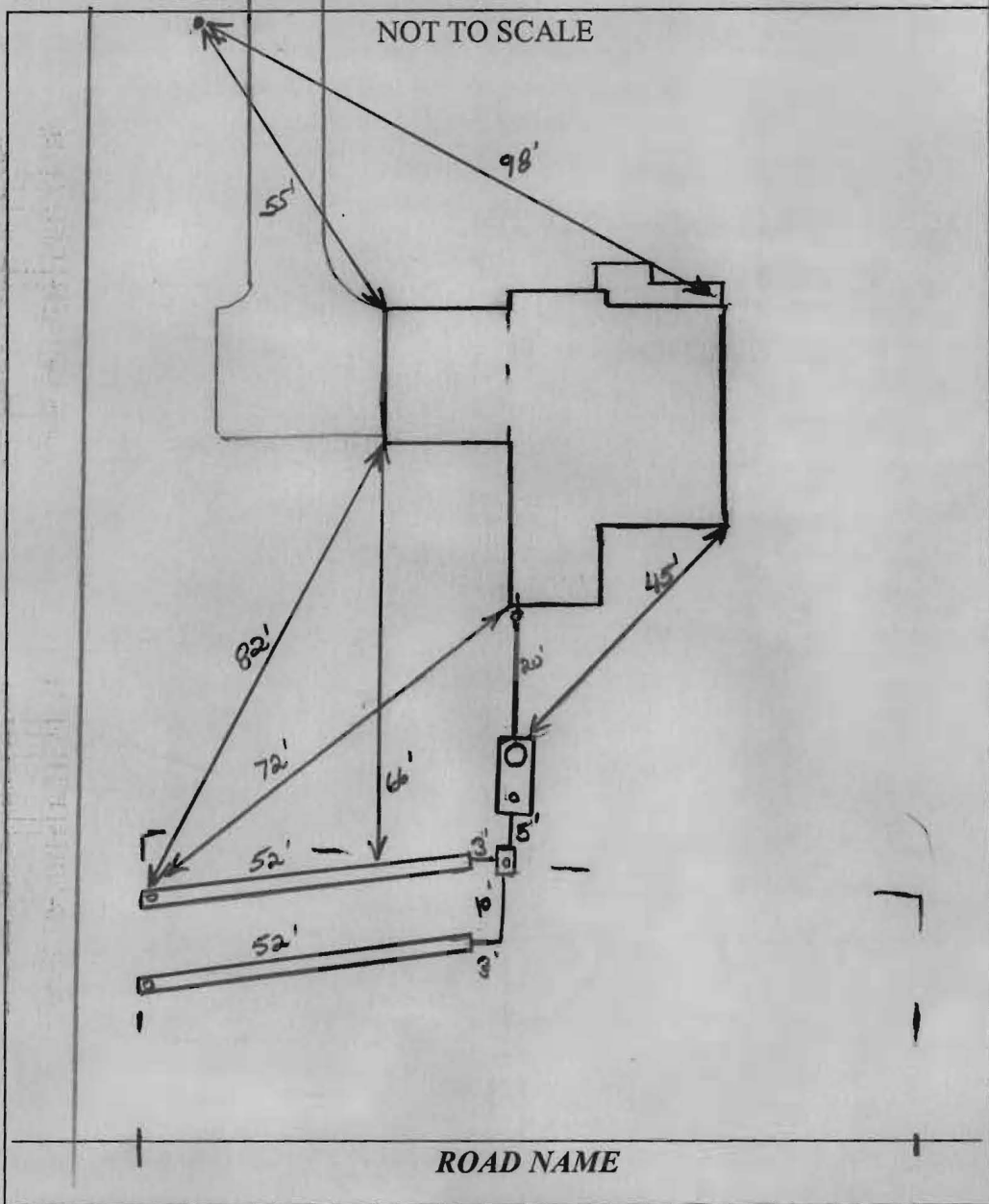
DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

| | | |
|-----------|--|---|
| TRENCHES: | LINEAR FEET REQUIRED: <u>103.33</u> <i>OK</i> | INLET DEPTH: <u>8</u> <u>4</u> |
| | TRENCH WIDTH: <u>3</u> ✓ | MAXIMUM BOTTOM DEPTH: <u>8</u> <u>6</u> |
| | MINIMUM SPACE BETWEEN TRENCHES: <u>9</u> ✓ | EFFECTIVE AREA BEGINNING DEPTH: <u>8</u> <u>4</u> ✓ |
| LOCATION: | PER APPROVED SITE PLAN. SEWAGE DISPOSAL AREA AND BAT UNIT LOCATION MUST BE STAKED BY LICENSED SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION. | |
| NOTES: | Set septic tank per layout inspection. Set distribution box per layout inspection. Install 103.33 feet of trench on contour. <i>2x50'</i> | |

ISSUED BY: Dana Bernard ISSUE DATE: _____ EXPIRATION DATE: 12/14/13

- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADIENT FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
 PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.
 CALL 410-313-1771 TO SCHEDULE INSPECTIONS.**



| TRENCH/DRAINFIELD DATA | | |
|-------------------------|-------|-----------|
| WIDTH | INLET | BOTTOM |
| 3 | 4 | 6' |
| NUMBER OF TRENCHES | | 2 |
| TOTAL LENGTH | | 104 |
| ABSORPTION AREA | | 3/2' x SW |
| DISTRIBUTION BOX LEVEL | | Levelers |
| DISTRIBUTION BOX BAFFLE | | Yes |
| DISTRIBUTION BOX PORT | | Yes |

| SEPTIC TANK DATA | |
|------------------------|----------|
| SEPTIC TANK I LEVEL | Yes |
| MANUFACTURER | Babylor |
| CAPACITY | 2000 GAL |
| SEAM LOC | Top |
| TANK LID DEPTH | 2 |
| BAFFLES | Yes |
| BAFFLE FILTER | - |
| MANHOLE LOC | Front |
| 6" PORT LOC | Rear |
| WATERTIGHT TEST | - |
| SLOTTED | Yes |
| DATE ON LID | 10-1-13 |
| PUMP/SEPTIC TANK LEVEL | |
| MANUFACTURER | |
| CAPACITY | GAL |
| SEAM LOC | |
| TANK LID DEPTH | |
| BAFFLES | |
| BAFFLE FILTER | |
| MANHOLE LOC | |
| 6" PORT LOC | |
| WATERTIGHT TEST | |
| SLOTTED | |
| DATE ON LID | |

PRE-CONSTRUCTION:

11/19/13 missing perc # 5 and 6. Told contractor will lay trenches towards perc holes 7 and 8. Got trench depths from neighbor's septic trenches same contour. Set D box top middle part of S/A. Install 2x 52' trenches on contour running towards lot 2B. Trenches/water/short in field, protected out. Keep tank 20' from house (min). Call for msp (KW)

INSTALLATION: 11/20/13 Both trenches dug. Contractor starting trenches. 'Septic tanks being set' looks good to continue. (KW)

11/21/13 Need to level D box. Told contractor to cover trench ends around obs place w/ filter cloth. Did not do a good job. (KW)

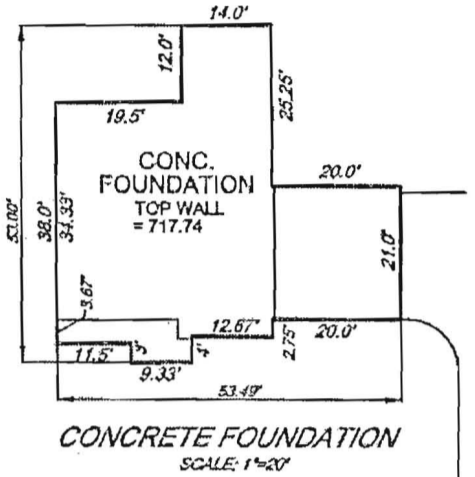
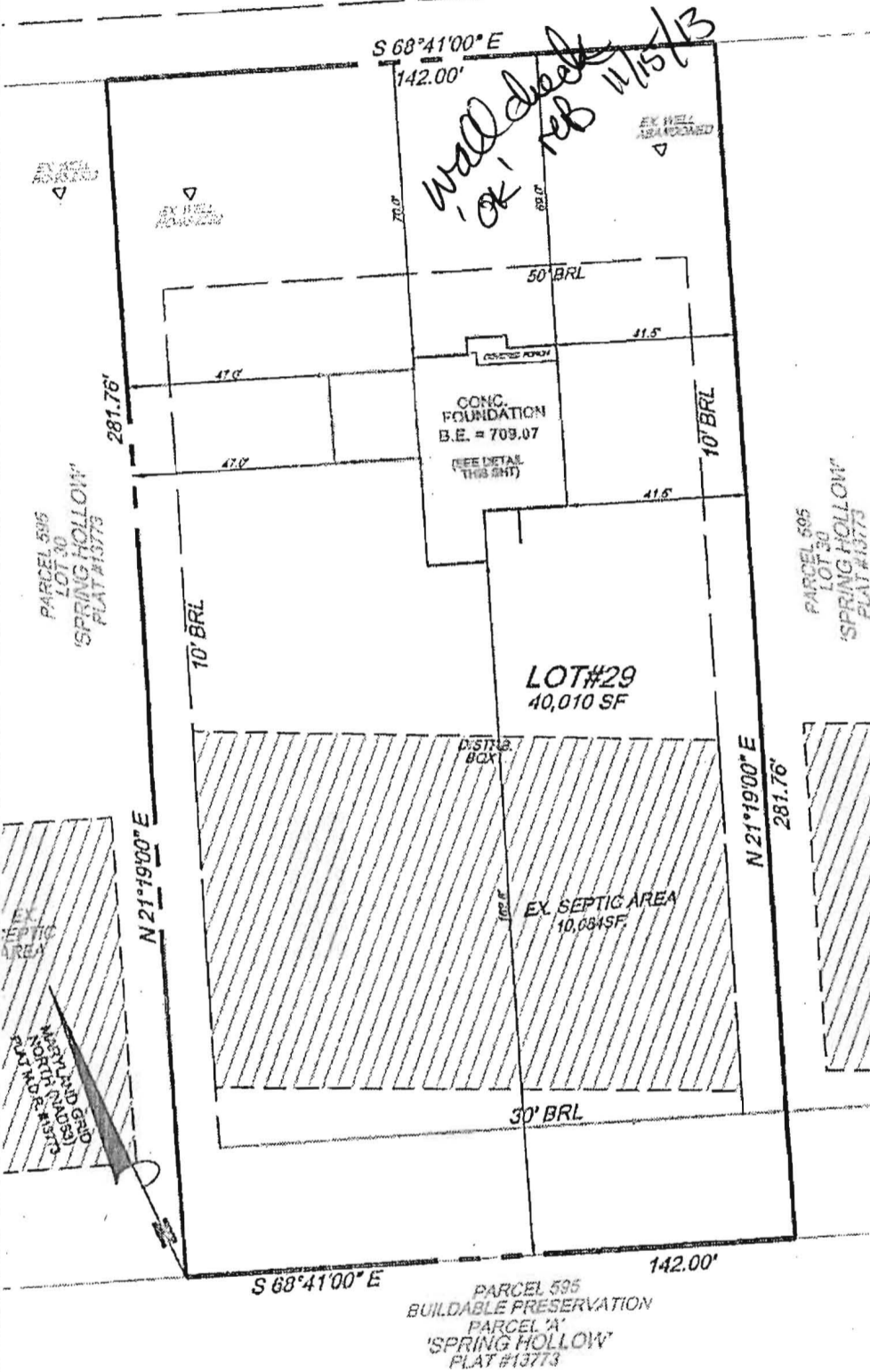
11/22/13 D box leveled. 'Speedy' leveler adjusted. OK to cover (KW)

FINAL INSPECTOR J. Wolf DATE OF APPROVAL 11/22/13

THE LOT SHOWN HEREON IS IN FLOOD
 ZONE "C" PER. F.E.M.A. FLOOD
 INSURANCE RATE MAP 2400440019B

HARDY ROAD
 LOCAL ROAD 50' RW

POLE
 CP#8



**FOUNDATION CERTIFICATION
 LOT 29
 "SPRING HOLLOW"**

#17267 HARDY ROAD
 SINGLE FAMILY DETACHED
 PLAT M.D.R. #13773

ZONED RC-DEO
 FOURTH ELECTION DISTRICT TAX MAP #07, GRID 08, PARCEL 528
 HOWARD COUNTY, MARYLAND

SCALE: 1" = 40' DATE: 09/17/2013

- NOTE: ACCURACY OF APPARENT SETBACK DISTANCES ARE 1 FT. ±
- NOTE: (A.) THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES AND DOES NOT CONSTITUTE A BOUNDARY SURVEY.
- (B.) THIS PLAT IS OF THE BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING.
- (C.) THIS PLAT SHOULD NOT BE RELIED UPON FOR THE LOCATION OR ESTABLISHMENT OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS

THIS IS TO CERTIFY THAT WE HAVE LOCATED THE IMPROVEMENTS AS SHOWN ACCORDING TO THE REGULATIONS GOVERNING THE MARYLAND STANDARDS OF PRACTICE FOR PROFESSIONAL LAND SURVEYORS EFFECTIVE DATE AUGUST, 2005

Prepared by:
CHARLES R. CROCKEN AND ASSOCIATES, INC.
 Civil Engineering - Land Planning
 802 LEE AVE.
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 Tel. (410) 549-2708
 Fax. (410) 549-9063

Richard S. Krebs 9-17-13
 MR. RICHARD S. KREBS MD. REG. NO. 10873 DATE: 9/17/2013
 EXP. DATE 4-24-14